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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Application No.:	10/645,971
Filing Date:	August 22, 2003
Applicant(s):	Rhodes et al.
Group Art Unit:	3612
Examiner:	Dennis H. Pedder
Title:	UNDERFLOOR STOWAGE OF A FOLDING SEAT IN A VEHICLE
Attorney Docket:	706441US3

CERTIFICATE OF FACSIMILE TRANSMISSION (37 CFR 1.8).

Date of transmission: 5-24-05 . I hereby certify that this paper is being facsimile transmitted to Art Unit 3612 of the United States Patent and Trademark Office at fax number 703-872-9306 on the date indicated above.

Teresa L. Tomayko
NAME OF PERSON MAILING PAPER

SIGNATURE

MS Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Sir:

In response to the Office Action mailed February 25, 2005, please amend the captioned application, as follows. The Commissioner is hereby authorized to charge any fees due in connection with this Amendment to Deposit Account No. 03-1800.

Amendments to the Claims begin at page 2.

Remarks begin at page 12.

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From the foregoing, it is believed that all of the stated grounds of rejection have been properly traversed, accommodated, or rendered moot. Applicants therefore respectfully request that the Examiner reconsider and withdraw all previously outstanding rejections. Thus, prompt and favorable consideration of this amendment is respectfully requested. If a telephone conference would expedite allowance or resolve any further questions, such a conference with the undersigned is invited at the convenience of the Examiner.

Respectfully submitted,

Dated: May 24, 2005

By: _____

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10/645,971

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S-30-05

PATENT APPLICATION FEE DETERMINATION RECORD	Application or Docket Number
Effective January 1, 2003	

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)	SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
			RATE	FEE		RATE	FEE
TOTAL CLAIMS	19		BASIC FEE	375.00	OR	BASIC FEE	750.00
FOR	NUMBER FILED	NUMBER EXTRA					
TOTAL CHARGEABLE CLAIMS	19 minus 20=	* 0	X$ 9=		OR	X$18=	
INDEPENDENT CLAIMS	2 minus 3 =	* 0	X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT		☐	+140=		OR	+280=	
			TOTAL		OR	TOTAL	750

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
					RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
Total	* 14	Minus	** 20	=	X$ 9= 26		X$18= 60	
Independent	* 4	Minus	*** 3	= 1	X42= 18		X84= 200	200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐	+140=		+280=	
					TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	X$ 9=		X$18=	
Independent	*	Minus	***	=	X42=		X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐	+140=		+280=	
					TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	X$ 9=		X$18=	
Independent	*	Minus	***	=	X42=		X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐	+140=		+280=	
					TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.